2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L01000022610

1. Entity Name

SHV MANAGEMENT ENTERPRISES, LLC



FILED
May 01, 2008 08:00 AF
Secretary of State

Principal Place of Business

Mailing Address

2913 WESTSIDE BOULEVARD JACKSONVILLE, FL 32209 2913 WESTSIDE BOULEVARD JACKSONVILLE, FL 32209



04222008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	•	Applied For
80-0021287		Not Applicable
5. Certificate of Status Desired		\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BRANT, ABRAHAM, REITER, MCCORMICK& GREENE, PA 50 NORTH LAURA STREET, SUITE 2750 JACKSONVILLE, FL 32202

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SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating).	

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000938836 05/28/08-80003-015 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS	MGRM VICKERS, EDGAR B TRUSTEE 2913 WESTSIDE BLVD
CITY+SI+ZIP	JACKSONVILLE, FL 32209
TITLE NAME STREET ADDRESS CITY+ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filling does not qualify for the

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes | further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

JRE:
SIGNATURE AND EXPED OR PROVED NAME OF BIGNING MAMAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/29/08

904-764-6541

Daytma Phone #